

NASA HEALTH PROMOTION AND WELLNESS TEAM

Minutes for: March 1, 2004 ViTS

Welcome: Good afternoon. I am Mae Hafizi. Welcome to the second ViTS for FY 2004. Today's agenda was mailed to you at an earlier date. The main focus of this meeting will be a review of all the current health promotion projects and pilots at each center.

Hearing Conservation was chosen as the health promotion campaign topic for Jan-Mar '04. we would like to hear from each and every center about how they implemented this education/promotion outreach program.

Similarly, centers who are actively involved with pilot projects have agreed to report on their progress and experience to date. These centers are:

JSC: Pneumovax immunization

Wallops: Mayo Clinic HealthQuest Newsletters

SSC and MAF: Mayo Clinic Quitline Smoking Cessation

GRC: ACS's Fresh Start Smoking Cessation

KSC and HQ: Women's Heart Advantage

NASA Agency: High risk influenza surveys

After attendance and roll call, we'll begin with a report of the pilot studies followed by a report on Hearing Conservation. In advance, I like to thank all of you for graciously accepting my request to speak about your programs. Such discussions provide a sharing and learning medium beyond comparison.

Let's begin our roll call with Ames.

Attendance: "X" means present

ARC	<input checked="" type="checkbox"/>	HQ	<input checked="" type="checkbox"/>	DFRC	<input checked="" type="checkbox"/>
JPL	<input checked="" type="checkbox"/>	DYN	<input checked="" type="checkbox"/>	GSFC	<input type="checkbox"/>
JSC	<input checked="" type="checkbox"/>	KSC	<input checked="" type="checkbox"/>	MSFC	<input type="checkbox"/>
GRC	<input checked="" type="checkbox"/>	SSC	<input checked="" type="checkbox"/>	WFF	<input checked="" type="checkbox"/>
LRC	<input checked="" type="checkbox"/>	MAF	<input checked="" type="checkbox"/>	WSTF	<input checked="" type="checkbox"/>

Topic: Health Promotion Projects at various Centers

1) Pneumovax Immunization (JSC) -

Sandra Amundson

Beginning August 1, 2003 JSC's Occupational Medicine Clinic offered Pneumovax immunization to employed Civil Servants over the age of 65. If under the age of 65, the individual had to produce a documented chronic health condition via a note from the treating PCP. The note confirmed continuity of care and assurance that the vaccination was medically necessary.

To date, the total cost to the health unit for the purchase of the vaccines has been less

than \$600. The clinic is planning to do Center wide advertisement to increase civil servant participation.

2) HealthQuest (Wallops)

Diane Weller

Assessment of the HealthQuest Newsletter as a health education tool- On monthly basis, 25 copies of the Mayo Clinic HealthQuest (HQ) newsletter is sent to Wallop's Health Unit. Prior to distribution, the Health Unit staples a readership survey to each of the newsletters. The intent of the survey is to obtain data from the readers on the effectiveness of HQ as an employee education outreach and health promotion tool. Initially all of the newsletters were placed in the reception area. Due to poor readership survey returns, ten were left in the waiting room and the remainder was sent to focus groups of employees. The survey returns remained low.

The Chief Nurse sent an email and asked for feedback on how to improve survey return rates. People recommended placing the HQ in more visible sites such as the fitness center and cafeteria foyer, as well as some direct mailing to interested people/groups. These ideas were implemented in February, and the return rate jumped from low single digits of 3 per month to 11 in February; a significant increase over previous months.

We remain hopeful that the new system will have a positive effect on the return of completed surveys.

Duration of the pilot study is from Nov '03- June '04. The study will be evaluated on going and in May '04 for determination of effectiveness and potential continuation at Wallops as well as expanded distribution to the other centers.

3) Smoking Cessation Programs

Mayo Clinic Quitline (Stennis, Michoud & KSC)

K. Eaton & T. Donohoe

Mayo Clinic's telephone based tobacco cessation program called Quitline was piloted at Stennis and Michoud. The project was introduced to the employees on Nov 21, 2003 with the implementation date of Jan 2, 2004. This project was coordinated with the support of Tim Donahoe EAP at SSC and Kathy Eaton EAP at MAF. The Medical Directors, Doctors Tequino and Barber, were actively involved in the project. Their services were utilized to write prescriptions for Nicotine Replacement Therapy. Both Kathy and Tim prescreened the participants to ensure that highly motivated people were entered into the program since there were only 18 available slots for enrollment.

To date 10 folks have enrolled from MAF, 5 from SSC and 3 from KSC. Starting this month, Kathy will be holding on site support groups. As adjunct services, Michoud's clinic also offered BP and weight monitoring to the enrollees. Majority of the 10 participants at MAF remain smoke free, each with a different quit date. At SSC 3 out of 5 have relapsed but Tim will be working closely with them to re-establish new quit dates. No report was available about the three at KSC. Comments from the participants about Mayo Clinic's counselors and the program have been positive.

Fresh start (Glenn Research Center)

B. Haupt

Independent of the Quitline pilot project, in September-October 2003, Bonne Haupt RN MSN initiated a unique and comprehensive smoking cessation program at GRC. The program is based on the American Cancer Society's Fresh start. The Fresh start program

is designed to help the participants to stop smoking by providing essential information and new strategies needed to direct their own efforts at stopping. The program consists of four one-hour group sessions that take place over a two-week period of time. Based on ACS data, an individual may need to complete the four one-hour facilitator led group sessions more than once in order to become smoke free. Statistics show that an individual may quit 7 times before they remain smoke free.

To date, 23 participants have gone through 5 rounds (4 sessions in each round).

Participants are encouraged to come to as many sessions as they like and to contact the facilitator when necessary. Because space availability was/is not an issue, none of the participants were/will be prescreened for readiness assessment. 9/23 have remained smoke free.

Bonne serves as the facilitator for the sessions. Over time she has learned that 8 participants per session create a good group makeup because at least 50% drop off. This number allows for a different nature and content at each session.

By the end of the year, the two programs (Quitline and Freshstart) will be assessed for their effectiveness.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5303a1.htm>

40th anniversary of the first surgeon general's report on smoking

4) Women's Heart Advantage (KSC and HQ)

J. Meister & K. Cartwright

Women's Heart Advantage (WHA) is a two pronged approach to education and early screening. It focuses on educating the Health Care Provider as well as the lay people, especially women. Kennedy Space Center (KSC), through their Center wide Health Education and Wellness Working Group is pursuing a stronger partnership with PMC, the local VHA hospital that has spearheaded this campaign in the county. The Women's Heart Advantage is VHA's efforts in increasing awareness about cardiac disease in women. Similar to American Heart Association's recently advertised campaign "The Go Red for Women" which encourages women to take charge of their health.

KSC's partnership with the local hospital has brought about the following events:

1. The clinic staff have received education from the hospital's ED Medical Director,
2. Three of the nursing staff have participated in a women's health fair that was advertised center wide but held at the hospital,
3. The clinic is working towards holding the same health fair at KSC with the support of the local hospital and the FEW Society (Federally Employed Women Society),
4. Two KSC clinic staff are members of the hospital's steering committee on WHA,
5. A section on women and cardiovascular disease has been added to the lecture content of all center wide CPR and First Aid trainings,
6. The center holds two Cardiovascular screenings per month and the application for the screening is passed out during all CPR and First Aid training classes,
7. The clinic physicians have met twice with PMC (the local hospital) physicians regarding the campaign,
8. Regardless of clinic visit type, during nursing assessment, the employee receives education regarding women and heart disease.

At HQ, Karen Cartwright, Chief Nurse, is trying to contact her local VHA and Summit Health participating hospital to discuss a similar partnership.

5) Influenza High Risk Surveys

Mae Hafizi

To date we have received 15,328 surveys from 12 centers. You have vaccinated, through your many efforts, 22,629 individuals. An increase from previous years.

All surveys have been tabulated and analyzed. The Medical Directors will receive a report soon. We hope the information will provide you with a picture of the health of the population you vaccinated. More so, the report may help you extrapolate about the health of your Center. We are also thinking about a presentation during the June Annual Conference.

Topic: Hearing Conservation

Center reports

The goal of a Hearing Conservation Program (HCP) is to prevent hearing loss at work and at home. Hearing conservation was the campaign topic for the second quarter January through March '04. The campaign cut across many disciplines. Therefore, our office emailed the entire center EH POCs to also inform them of the campaign.

Center reports

Wallops_ In the waiting room, the bulletin board displayed all of the provided materials and information from web sites. Pamphlets were given out with the RN portion of each PE. Both RN and Dr. discussed HC during PE. A poster in our testing room shows normal inner ear and one after the cilia are damaged. It gets more attention than we thought it would. The clinic is under the IH dept. at GSFC. Their offices are in the same bldg. as the HU.

KSC_ Material was left in the lobby. Also, during the center wide W/C Network meeting, the issue was discussed and the materials were handed out. Similarly, at the Health Education and Wellness Working Group meeting.

SSC_ Material was placed on the bulletin board. Also, targeted discussion and education material towards those with STS shift of 7-9 dB.

MAF_ Materials were distributed during PE. In the past year, the clinic increased partnership with Safety and those who have had a shift.

Dryden_ Three presentations have been given center wide on the topic of HC. Lessons learned: a. the complexity and interdependence of OSHA and California W/C laws related to hearing loss, recordability and compensability; b. discovered issues regarding the required annual training and update for employees in a HCP. Both findings/issues are actively being resolved.

HQ_ Material was left in the lobby and a lunch and learn is scheduled for 3/17/04.

Langley_ Three types of hearing protection equipment are offered at the center. Employees who receive audiograms as part of PE also receive pamphlets. Work with IH in any list updates.

Glenn_ The Noise Destroys Poster is an effective tool to engage employees in discussion. We are looking into the purchase of a video otoscope to be used by Safety and during health fairs. Working with IH to also educate folks who schedule audiograms.

JSC_ 95% of all the pamphlets were given to IH, the other 5% was kept in the waiting room at the clinic. At JSC close to 300 employees are in the HCP. We have been working hard to tighten the process for the HCP. We have also had several persistent STS in the past year.

Ames_ The HCP process was reviewed and updated in the past year. We have also had several persistent STS. IH is meeting with supervisors to do noise studies as well as supervisor and employee education. A speaker has been scheduled for March. A health education table is placed in the cafeteria. Marian Glazer reintroduced herself to the HPW Committee as a returning member.

WSTF_ Pamphlets were handed out in all training classes. IH and Chief Nurse work closely as a team in the HCP process.

Topic: Future Health Campaigns

Mae Hafizi

3rd Q FY 2004 April through June: Weight Management

We have been working on a comparative chart of eight popular diets and weight management plans against the USDA Food Guide Pyramid. This pamphlet is being developed in our office with support from Registered Dietitians. As soon as the pamphlet is completed and printed, we will be mailing them to you. A PDF file of the pamphlet will be placed on the ohp website. On the back of the pamphlet we have listed other relevant web links.

<http://www.msnbc.msn.com/id/4387401/>

Hopping back on the diet wagon: Overcoming guilt is the first step

<http://www.aicr.org/index.lasso>

AICR is the cancer charity that fosters research on diet and cancer prevention and educates the public about the results.

4th Q FY 2004 July through September: Colon Cancer Awareness

For this campaign the clinics will receive the following materials:

- 1) A pamphlet titled Colorectal Cancer: Preventable, Treatable, Beatable (English and Spanish).
- 2) A Fact Sheet titled Colorectal Cancer: A preventable cancer (English and Spanish).
- 3) A pamphlet on facts related to Colorectal Cancer in the African Americans.
- 4) Educational materials and a poster from CDC, pending delivery, date unknown.
- 5) An on line quiz.

6) The Buddy Bracelets.

To make the campaign interactive with the potential to obtain outcomes we have the following suggestions:

- 1) Encourage the employees to pass on the buddy bracelet after they have completed a colorectal screening.
- 1) Refer employees and their families to the OHP website to take part in the colorectal quiz. It has 10 questions. Our office can keep track of the number of hits to the site.
- 2) If you know how many Fecal Occult Blood Testing (Hemoccults) are being performed currently (or historically), you can compare statistics on usage pre & post campaign. Then report these numbers.
- 3) If your Center offers Sigmoidoscopies, you can compare statistics pre & post campaign.

http://www.cancer.org/docroot/NWS/content/NWS_1_1x_The_Future_of_Colorectal_Cancer_Screening.asp

Colorectal cancer is the number two cancer killer in the US, but screening for it is a topic many Americans don't like to discuss, much less do anything about. While none of the screening tests commonly used (fecal occult blood test, barium enema, flexible sigmoidoscopy, or colonoscopy) is perfect, getting people to use any test at all has been a challenge.

Recent studies show that fewer than 40% of the people who should be screened do so on a regular basis. There are many reasons for this, but among the most prominent is that many people are uncomfortable with some of the tests themselves, especially colonoscopy.

<http://www.preventcancer.org/colorectal/>

Pamphlet and the Buddy Bracelet from preventcancer.org

<http://www.preventcancer.org/materials/itemDetail.cfm?id=26>

<http://www.preventcancer.org/materials/itemDetail.cfm?id=27>

Colorectal Cancer fact sheets in English and Spanish

<http://www.cdc.gov/cancer/colorectal/calltoaction/calltoaction.pdf>

Slide presentation from CDC, A Call to Action

http://www.cancer.org/docroot/CRI/CRI_2_1x.asp?dt=10

Overview: Colon and Rectum Cancer

Get an overview of each of the topics by clicking the document title.

http://www.ifcp.us/NewsEvents-National_Cancer_Prevention_Month.cfm.

National Cancer Prevention Month can be found

http://www.guideline.gov/summary/summary.aspx?view_id=1&doc_id=3724

AHRQ site

http://www.cancer.org/docroot/NWS/content/NWS_1_1x_Virtual_Colonoscopy_May_Work_As_Screening_Method_For_Colon_Cancer.asp

Virtual colonoscopy

<http://www.msnbc.msn.com/id/4030557/>

A highly preventable cancer: Diet, lifestyle may lower colon cancer risk

Topic: Future ViTS

Mae Hafizi

Monday	6/07/04	12:00 - 13:30
Monday	9/13/04	12:00 - 13:30
Monday	12/13/04	12:00 - 13:30

We like to receive feedback and suggestions about the chosen health topics.

Hope to see you on June 6th. Thank you for your participation. We will adjourn now, unless there are questions.

Respectfully Submitted,
Mae Hafizi
3.2.03